

ANNEX B

*Note: A complete pre-registration checklist, registration form, PT Card, Weapons Card, and check must accompany this registration form. Each participant will need to bring with them a copy of the pre-registration checklist, registration form, TDY orders, PT Card, and Weapons Card. These items will be needed for registration at the hotel.

SECTION 1: COMMON TASK TESTING REQUIREMENT

Each soldier wishing to participate in the GAFPB must pass each of the following Common Tasks. The reference for teaching and testing these tasks is STP 21-1-SMCT, Soldiers Manual of Common Tasks, Skill Level 1. Soldiers from other services must contact USAMRICD to determine substitute tasks.

<u>Task Name</u>	<u>Task Number</u>	<u>Date Tested</u>	<u>Pass/Fail</u>
1. Evaluate a Casualty	081-831-1000	_____	_____
2. Prevent/Control Shock	081-831-1005	_____	_____
3. Perform First Aid for an Open Chest Wound	081-831-1026	_____	_____
4. Perform First Aid for Heat Injuries	081-831-1008	_____	_____
5. Perform First Aid for a Suspected Fracture	081-831-1034	_____	_____

SECTION 2: ARMY PHYSICAL FITNESS TEST AND HEIGHT/WEIGHT REQUIREMENT

Since the GAFPB is restricted to 250 participants, USAMRICD wants to ensure that applicants have demonstrated a minimum fitness level. **All applicants will have passed the Army Physical Fitness Test within the last 6 months.** Applicants from other services must contact USAMRICD to determine a substitute test and score. In addition, no applicant may be "Flagged" for weight or be on the Weight Control Program. Profiles will be considered on a case-by-case basis.

Date of APFT	Pass/Fail	Score	Meets Height/Weight Standards (yes/no)
_____	_____	_____	_____

SECTION 3: WEAPONS QUALIFICATION

All participants must submit a current (within 1 Year) weapons qualification card.

Date of Qualification	Score
_____	_____

SECTION 4: UNIT REPRESENTATIVE VERIFICATION

Unit Representative's Name: _____

Duty Position: _____

Phone Number: _____

Email Address: _____

I, the undersigned, verify that the information provided on this sheet is accurate and truthful.

Signature

Date